Case 16-11027 Doc 19 Filed 12/15/16 Page 1 of 50

FILED DEC 15'16 AM11'33USBC-GBO

Fill in this information to identify the case:	
Debtor name The Benefit Corner, LLC	
United States Bankruptcy Court for the:Middle District of North Carolina (State)	
Case number (If known): 16-1102.7	
	☐ Check if this is an amended filing
Official Form 206Sum	
Summary of Assets and Liabilities for Non-Individuals	12/15
Part 1: Summary of Assets	
Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)	
1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$47,044.15
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ Unknown
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$47,044.15
Part 2: Summary of Liabilities	
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)	
Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D	\$365,594.50
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	And the second s
3a. Total claim amounts of priority unsecured claims:	
Copy the total claims fromPart 1 fromline 5a of Schedule E/F	\$ 0
3b. Total amount of claims of nonpriority amount of unsecured claims:	± ¢4 627 055 05
Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F	+ \$1,627,055.05
4. Total liabilities	\$
Lines 2 + 3a + 3b	1,992,649.55

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

debtor's interest, do not deduct the value of secured claims. See the histractions to understand the terms does in the	
Part 1: Cash and cash equivalents	
1. Does the debtor have any cash or cash equivalents?	
No. Go to Part 2.	
Yes. Fill in the information below.	
All cash or cash equivalents owned or controlled by the debtor	Current value of debtor's interest
2. Cash on hand	\$
3. Checking, savings, money market, or financial brokerage accounts (Identify all)	
Name of institution (bank or brokerage firm) Type of account Last 4 digits of account number	
3.1	\$
3.2	\$
4. Other cash equivalents (Identify all)	
4.1. Brooks Pierce Trust Account	\$20,452.16
4.2. Trustee Everett Saslow	\$19,045.33
5. Total of Part 1	\$39,497.49
Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.	
Part 2: Deposits and prepayments	
6. Does the debtor have any deposits or prepayments?	
□ No. Go to Part 3.	
Yes. Fill in the information below.	
	Current value of debtor's interest
7. Deposits, including security deposits and utility deposits	
Description, including name of holder of deposit	
7.1. Lease Deposit - Boyd II Greensboro	\$7,546.66
7.2	\$

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Debtor

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Case number (# known) 6-11027

8.	Prepayments, including p	repayments on executory cont	racts, leases, insurance, taxes, a	nd rent	
	Description, including name of	holder of prepayment			
	8.1				\$_0
	8.2				\$_0
9.	Total of Part 2.				7,546.66
	Add lines 7 through 8. Copy	y the total to line 81.			\$_7,540.00
Pa	rt 3: Accounts receiv	vable			
10.	Does the debtor have an	ny accounts receivable?		- 44	
	No. Go to Part 4.	,			
	Yes. Fill in the informa	ation below			
	Tes. Fill III the informa	mon below.			Current value of debtor's
					interest
11.	Accounts receivable				
	11a. 90 days old or less:	Unknown Insurance Commissions -	=	·	\$_Unknown
	ria. 30 days old or less.	face amount	doubtful or uncollectible accounts		
	11b. Over 90 days old:			→	\$
		face amount	doubtful or uncollectible accounts		
12	Total of Part 3				\$Unknown
		a + 11b = line 12. Copy the total to	o line 82.		\$Unknown
		.,			
Pa	rt 4: Investments				
13	Does the debtor own an	v investments?			
10.	No. Go to Part 5.	y mivosuments:			
	Yes. Fill in the informa	ation below.			
				Valuation method	Current value of debtor's
				used for current value	interest
14.	. Mutual funds or publicly	traded stocks not included in	Part 1		
	Name of fund or stock:				
					\$
	14.2.		44.	AV	\$
15	. Non-publicly traded sto	ck and interests in incorporated	d and unincorporated businesses	·,	
	including any interest in	an LLC, partnership, or joint v	renture		
	Name of entity:		% of ownership:		
	15.1		%		\$
	15.2		%		\$
16		porate bonds, and other negoti	able and non-negotiable		
	instruments not include	ed in Part 1			
	Describe:				
	то.2				\$
	Total of Dod 4				
17	. Total of Part 4 Add lines 14 through 16.	Convithe total to line 92			\$
	Aud lines 14 thlough 16.	copy the total to line 63.			

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Debtor

The Benefit Corner, LLC

Par	t 5: Inventory, excluding agriculture	assets			
18.	Does the debtor own any inventory (exclude	ding agriculture assets	s)?		
	No. Go to Part 6.				
	☐ Yes. Fill in the information below.				
	General description	Date of the last	Net book value of	Valuation method used	Current value of
		physical inventory	debtor's interest	for current value	debtor's interest
40		on This pale in March 1997.	(Where available)		
19.	Raw materials		¢		\$
		MM / DD / YYYY	\$		
20.	Work in progress				\$
		MM / DD / YYYY	\$		Ψ
21.	Finished goods, including goods held for	resale			
		MM / DD / YYYY	\$		\$
22.	Other inventory or supplies				
		MM / DD / YYYY	\$		\$
23.	Total of Part 5				\$
	Add lines 19 through 22. Copy the total to line	e 84.			
24.	Is any of the property listed in Part 5 peris	hable?			
	U No □				
0.5	Yes		O dava bafara tha bank	runtov was filed?	
25.	Has any of the property listed in Part 5 bee	en purchased within 20	days before the bank	itupicy was med:	
	No Yes. Book value \	/aluation method	Curr	rent value	
26	Has any of the property listed in Part 5 bee				
20.	No	in appraison by a pro-	000701101 11111111111111111111111111111	,	
	☐ Yes				
Par	t 6: Farming and fishing-related ass	ets (other than title	ed motor vehicles a	nd land)	
27	Does the debtor own or lease any farming	and fishing related as	esate (other than titled	motor vehicles and land)?	
21.	No. Go to Part 7.	and histing-related as	sets (other than theu	motor vernoles and land).	
	Yes. Fill in the information below.				
			Net book value of	Valuation method used	Current value of debtor's
	General description		debtor's interest	for current value	interest
			(Where available)		
28.	Crops—either planted or harvested				
		· · · · · · · · · · · · · · · · · · ·	\$	A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-	\$
29.	Farm animals Examples: Livestock, poultry,	farm-raised fish			
			\$		\$
30.	Farm machinery and equipment (Other that	an titled motor vehicles)			
			\$		\$
31.	Farm and fishing supplies, chemicals, and	I feed			
			\$		\$
32.	Other farming and fishing-related property	not already listed in l	Part 6		
			\$		\$

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The Benefit Corner, LLC Debtor 33. Total of Part 6. Add lines 28 through 32. Copy the total to line 85. 34. Is the debtor a member of an agricultural cooperative? Yes. Is any of the debtor's property stored at the cooperative? ☐ No 35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed? ☐ No ☐ Yes. Book value \$_____ Valuation method _____ Current value \$___ 36. Is a depreciation schedule available for any of the property listed in Part 6? ☐ No Yes 37. Has any of the property listed in Part 6 been appraised by a professional within the last year? ☐ No ☐ Yes Office furniture, fixtures, and equipment; and collectibles 38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles? No. Go to Part 8. ☐ Yes. Fill in the information below. Valuation method Current value of debtor's Net book value of General description interest debtor's interest used for current value (Where available) 39. Office furniture 40. Office fixtures 41. Office equipment, including all computer equipment and communication systems equipment and software 42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles 42.3___

43. Total of Part 7.

☐ No Yes

☐ No ☐ Yes

Add lines 39 through 42. Copy the total to line 86.

44. Is a depreciation schedule available for any of the property listed in Part 7?

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

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er, LLC

Case number (if known) | Case number

Debtor

The Benefit Corner, LLC

Part 8: Machinery, equipment, and vehicles		
46. Does the debtor own or lease any machinery, equipment, or vehic	cles?	
No. Go to Part 9.		
Yes. Fill in the information below.		
General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest Valuation method use for current value (Where available)	debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm v	vehicles	
47.1	\$	\$
47.2		\$
47.3	\$	\$
47.4	\$	\$
48. Watercraft, trailers, motors, and related accessories Examples: Bo trailers, motors, floating homes, personal watercraft, and fishing vesses		
48.1	\$	\$
48.2	\$	\$
49. Aircraft and accessories		
49.1	s	\$
49.2	\$	\$
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)		
	\$	\$
51. Total of Part 8.		\$
Add lines 47 through 50. Copy the total to line 87.		
52. Is a depreciation schedule available for any of the property listed ☐ No ☐ Yes	in Part 8?	
53. Has any of the property listed in Part 8 been appraised by a profe ☐ No ☐ Yes	essional within the last year?	
	The state of the second	the lateral section of the section o

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Page 7, LLC

Case number (if known) \(\) 6- \(\) 10 \(\) 7

Debtor

The Benefit Corner, LLC

54.	Does the debtor own or lease any real proper	ty?			111111111111111111111111111111111111111
	No. Go to Part 10.				
	Yes. Fill in the information below.				
55.	Any building, other improved real estate, or la	and which the debtor	owns or in which the	debtor has an interest	and the state of t
	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
	55.1		\$		\$
	55.2		\$		\$
	55.3		\$		\$
	55.4				\$
					\$
	55.5				
	55.6		\$		\$
56.	Total of Part 9.				\$
	Add the current value on lines 55.1 through 55.6	and entries from any a	dditional sheets. Copy	the total to line 88.	¥
	 No Yes Has any of the property listed in Part 9 been a No Yes 		sional within the last	year?	H Birth Discourance desirables at 1 4 6 6
Pari	10: Intangibles and intellectual proper	rty			
59.	Does the debtor have any interests in intangil No. Go to Part 11. Yes. Fill in the information below. General description	bles or intellectual pr	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
			(Where available)		
60.	Patents, copyrights, trademarks, and trade se	ecrets	\$Unknown		\$ Unknown_
61.	Internet domain names and websites		\$		\$
62.	Licenses, franchises, and royalties		\$		\$
63.	Customer lists, mailing lists, or other compile	ations	•		S
64.	Other intangibles, or intellectual property		\$		\$
65.	Goodwill		\$	W. 10 / 10 / 10 / 10 / 10 / 10 / 10 / 10	\$
66.	Total of Part 10. Add lines 60 through 65. Copy the total to line 89).			\$Unknown

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Debtor

The	Benefit	Corner,	LLC
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The	ве	neti	t (Jorn	er,	LL	.C
		_	_		_	_	

ene boundarie (iliano		THE THE WORLD STREET,
67.	Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) No Yes	s) and 107)?
68.	Is there an amortization or other similar schedule available for any of the property listed in Part 10?	11 12 12 12 12 12 12 12 12 12 12 12 12 1
00.	□ No □ Yes	170
60	Has any of the property listed in Part 10 been appraised by a professional within the last year?	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
03.	No Yes	HILL AND CARAGO PAYS A
Par	t 11: All other assets	T Jennesey von
70.	Does the debtor own any other assets that have not yet been reported on this form?	
	Include all interests in executory contracts and unexpired leases not previously reported on this form.	
	No. Go to Part 12.	1
	Yes. Fill in the information below.	Current value of
		debtor's interest
71.	Notes receivable	
	Description (include name of obligor)	
	Total face amount doubtful or uncollectible amount	\$
72.	Tax refunds and unused net operating losses (NOLs)	
	Description (for example, federal, state, local)	
	Tax year	\$
	Tax year	\$
	Tax year	\$
73.	Interests in insurance policies or annuities	\$
74.	Causes of action against third parties (whether or not a lawsuit has been filed)	
		\$
	Nature of claim	
	Amount requested \$	
75.	Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims	
	Nature of claim	\$
	Amount requested \$	
70	· · · · · · · · · · · · · · · · · · ·	
76.	Trusts, equitable or future interests in property	
77.	Other property of any kind not already listed Examples: Season tickets, country club membership	\$
		S
	· ·	¢
		Ψ
78.	Total of Part 11.	\$
	Add lines 71 through 77. Copy the total to line 90.	
79.	Has any of the property listed in Part 11 been appraised by a professional within the last year? ☐ No ☐ Yes	

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Debtor

The Benefit Corner, LLC

Part 12:

Summary

In Part 12 copy all of the totals from the earlier parts of the form.			
Type of property	Current value of personal property	Current value of real property	
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$39,497.49		
81. Deposits and prepayments. Copy line 9, Part 2.	\$7,546.66		
82. Accounts receivable. Copy line 12, Part 3.	\$Unknown		
83. Investments. Copy line 17, Part 4.	\$		
84. Inventory. Copy line 23, Part 5.	\$		
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$		
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$		
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$		
88. Real property. Copy line 56, Part 9		\$	
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$Unknown		
90. All other assets. Copy line 78, Part 11.	+ \$,
91. Total. Add lines 80 through 90 for each column	\$_47,044.15	♣ 91b. \$Unknown	
02. Total of all property on Schadula A/R. Lines 91a ± 91b = 92			\$ 47,044.15

F	ill in this information to identify the case:		
ı	Debtor name The Benefit Corner, LLC	North Carolina	
	16-11077	(State)	
	Case number (If known):		Check if this is an amended filing
(Official Form 206D		
•	Schedule D: Creditors V	ho Have Claims Secured b	y Property 12/15
_	Be as complete and accurate as possible.		
_	to as complete and accurate as possible.		
1.	Do any creditors have claims secured by deb	tor's property? s form to the court with debtor's other schedules. Debtor h	as nothing else to report on this form.
	Yes. Fill in all of the information below.	S TOTH to the court with deptor 5 other schedules. Deptor in	as nothing clos to report on the terms
P	art 1: List Creditors Who Have Secure	ed Claims	
2.	List in alphabetical order all creditors who has secured claim, list the creditor separately for each	ve secured claims. If a creditor has more than one ch claim.	Column A Column B Amount of claim Do not deduct the value of collateral that supports this claim
2.1	Creditor's name	Describe debtor's property that is subject to a lien	of conateral.
	Fox Capital	Insurance Commissions	-\$_70,273.00\$Unknown Future Commission
	Creditor's mailing address		_
	242 W. 35th Street 14th Floor		_
	New York, NY 10018	Describe the lien	
	Creditor's email address, if known	Access to the company checking account Is the creditor an insider or related party?	-
	Creditor's email address, il known	□ No	
		Yes Is anyone else liable on this claim?	
	Date debt was incurred 11/30/15		
	Last 4 digits of account number	Yes. Fill out Schedule H: Codebtors (Official Form 206H).	
	Do multiple creditors have an interest in the same property?	As of the petition filing date, the claim is: Check all that apply.	
	□ No	☐ Contingent	
	Yes. Specify each creditor, including this creditor, and its relative priority.	☐ Unliquidated ☐ Disputed	
		•	
2.2	Creditor's name	Describe debtor's property that is subject to a lien	
2.2	_Forward Financing	Insurance Commissions \$45,321.50) \$Unknown Commissions_
	Creditor's mailing address	ilisurance commissions	
i i i	36 Bromfield Street 2nd Floor		_
	Boston, MA 02108	Describe the lien Access to company checking account	
	Creditor's email address, if known	Is the creditor an insider or related party?	-
		☐ No ☐ Yes	
20	Date debt was incurred 12/10/15	Is anyone else liable on this claim?	
	Last 4 digits of account	☐ No☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).	
	number	As of the petition filling date, the claim is:	
	Do multiple creditors have an interest in the same property?	Check all that apply.	
The same	No	☐ Contingent☐ Unliquidated	
	☐ Yes. Have you already specified the relative priority?	Disputed	
webstern same	No. Specify each creditor, including this creditor, and its relative priority.		
	Yes. The relative priority of creditors is specified on lines	•	
3.		mn A, including the amounts from the Additional	\$365,594.50

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F	Fill in this information to identify the case:			
	Debtor The Benefit Corner, LLC	Lastle Caralina		
1	United States Bankruptcy Court for the: Middle District of N	North Carolina (State)		
	Case number 16-110 27			
L				Check if this is an amended filing
<u>C</u>	Official Form 206E/F			
S	schedule E/F: Creditors W	ho Have Unsecui	red Claims	12/15
or (C th	e as complete and accurate as possible. Use Part necured claims. List the other party to any execuna Schedule A/B: Assets - Real and Personal Prope Official Form 206G). Number the entries in Parts 1 are Additional Page of that Part included in this form	tory contracts or unexpired leases rty (Official Form 206A/B) and on S and 2 in the boxes on the left. If mon n.	that could result in a claim. A Schedule G: Executory Contra	iso list executory contracts cts and Unexpired Leases
ra	It 1: List All Creditors with PRIORITY Uns	secured Claims		
1.	Do any creditors have priority unsecured claims? No. Go to Part 2. Yes. Go to line 2.	? (See 11 U.S.C. § 507).		
	List in alphabetical order all creditors who have u	necoured alaims that are entitled t	o priority in whole or in part	f the debtor has more than
2.	3 creditors with priority unsecured claims, fill out and			allo dobtor rido ritoro arian
			Total claim	Priority amount
.1	Priority creditor's name and mailing address	As of the petition filing date, the cla	nim is: §	\$
_		Check all that apply. Contingent		
		Unliquidated Disputed		
	Date or dates debt was incurred	Basis for the claim:		
	Date of dates dest rue mounts			
	Last 4 digits of account	Is the claim subject to offset?		
	number	☐ No ☐ Yes		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()			
.2	Priority creditor's name and mailing address	As of the petition filing date, the cla	aim is: \$	\$
		Check all that apply. Contingent		
		☐ Unliquidated☐ Disputed		
	Date or dates debt was incurred	Basis for the claim:		
				
	Last 4 digits of account	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()	□ No □ Yes		
2.3	Priority creditor's name and mailing address	As of the petition filing date, the clacked all that apply. Contingent	aim is: \$	\$
	-	Unliquidated Disputed		
	Date or dates debt was incurred	Basis for the claim:		
		Ave de la constant de		
	Last 4 digits of account number	Is the claim subject to offset? ☐ No		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()	Yes		

D	ρ	h	te	ጎ	r

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The Benefix Conner, LL C case number (# Known) 6- 11637

opy this page if more space is needed. Continue no	umbering the lines sequentially from the		
revious page. If no additional PRIORITY creditors e		Total claim	Priority amount
Priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent	\$	\$
	Unliquidated Disputed		
Date or dates debt was incurred	Basis for the claim:		
Last 4 digits of account number	Is the claim subject to offset? ☐ No ☐ Yes		
claim: 11 U.S.C. § 507(a) ()			
Priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$	\$
Date or dates debt was incurred	Basis for the claim:		
Last 4 digits of account number	Is the claim subject to offset? No Yes		
Priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$	\$
Date or dates debt was incurred	Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()	Is the claim subject to offset? No Yes		
Priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$	\$
Date or dates debt was incurred	Basis for the claim:		
Last 4 digits of account number	Is the claim subject to offset? No Yes		

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Debtor

The Benefit Corner, LLC_

art 2:	List All Creditors	with NONPRIORITY	Unsecured Claims
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3.	3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.				
	unsecured dailins, fill out and attach the Additional Page of Part 2.		Amount of claim		
3.1	Nonpriority creditor's name and mailing address _	As of the petition filling date, the claim is: Check all that apply.	\$_40,000.00		
	Brandon Adams	☐ Contingent ☐ Unliquidated ☐ Disputed			
	108 Tortuga Bay Dr	Basis for the claim: _Loan Is the			
	St Augustine FL 32092				
	Date or dates debt was incurred7/22/16	claim subject to offset?			
	Last 4 digits of account number	Yes			
3.2	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$5,631.33		
	P.O. Box 1270	☐ Contingent☐ Unliquidated☐ Disputed			
	Newark, NJ 07101	Basis for the claim:Credit Card			
		Is the claim subject to offset?	TO THE PARTY OF TH		
	Date or dates debt was incurred4/16	□ No			
	Last 4 digits of account number	Yes			
3.3	Nonpriority creditor's name and mailing address American Express	As of the petition filing date, the claim is: Check all that apply. Contingent	\$31,160.58		
	P.O. Box 1270	Unliquidated Disputed			
	Newark, NJ 07101				
	Totals, No 07101	Basis for the claim:Credit Card	_		
1	Date or dates debt was incurred7/16	Is the claim subject to offset?			
	Last 4 digits of account number	Yes			
3.4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$4,666.02		
	Regina Atencio	☐ Contingent ☐ Unliquidated			
	420 Oak Meadow Lane	☐ Disputed	•		
	San Antonio, TX 78253	Basis for the claim: _Commissions Owed			
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?			
	Last 4 digits of account number	No Yes			
3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	The state of the s		
5.5		Check all that apply.	\$1,090.00		
	Amer Awad	Contingent Unliquidated			
	224 A Bullsboro Drive	Disputed			
	Newnan, GA 30263	Basis for the claim: Commissions Owed	-		
	Date or dates debt was incurred7/15/16	Is the claim subject to offset?			
	Last 4 digits of account number	Yes			
3.6	Nonpriority creditor's name and mailing address _	As of the petition filing date, the claim is: Check all that apply.	\$425.84		
	Clyde Bailey	☐ Contingent ☐ Unliquidated			
	11703 Huebner Rd. #106-300	☐ Disputed			
B. Company	San Antonio TX 78230	Basis for the claim: _Commissions Owed	_		
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?			
	Last 4 digits of account number	☐ No ☐ Yes			

Debtor

The Benefit Corner, LLC_

Part 2: **Additional Page**

COLUMN TO SERVICE	py this page only if more space is needed. Continue numberi evious page. If no additional NONPRIORITY creditors exist, do		Amount of claim
3.7_	Nonpriority creditor's name and mailing address Brian Barto	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated	\$3,888.17
	107 Massie Dr	☐ Disputed ☐ Liquidated and neither contingent nor disputed	
	_Winchester, VA 22602	Basis for the claim: _Commissions Owed	
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	□ No □ Yes	
3.8	Nonpriority creditor's name and mailing address _	As of the petition filing date, the claim is:	\$1,906.49
	Danny Bates	☐ Contingent☐ Unliquidated☐ Disputed	
	123 Schultz LaneRockingham, NC 28379	Basis for the claim: Commissions Owed	
1001	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	☐ No ☐ Yes	
3.9_	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$2,086.01
The state of the s	David Becker	☐ Contingent	
	2022 Live Oak Street		
	San Angelo, TX 76901	Is the claim subject to offset?	
Control of the contro	Date or dates debt was incurred 7/15/16 Last 4 digits of account number	□ No □ Yes	
3.10	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$_58.51
	Vinit Bhatia	☐ Contingent ☐ Unliquidated ☐ Disputed	
	109 Bryce Meadow Dr Holl Springs, NC 27540	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	☐ No ☐ Yes	
3.11	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$22,500.00
	Don Brashears	Cneck all that apply. Contingent Unliquidated Disputed	
	293 Seabrook Drive	_	
	Hilton Head, SC 29926	Basis for the claim: Loan	
	Date or dates debt was incurred 7/29/15 Last 4 digits of account number	Is the claim subject to offset? ☐ No ☐ Yes	

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The Benefit Corner, LLC_

Case number (if kno

List All Creditors with NONPRIORITY Unsecured Claims Part 2:

3.	3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.				
	unsecured daims, iiii out and attach the Additional Page of Part 2.		Amount of claim		
3.12	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$17,965.00		
	Bank of America,	Contingent Unliquidated			
	P.O. Box 15019, Wilmington, DE 19850	Disputed Basis for the claim: _Legal Services			
			-		
	Date or dates debt was incurred 12/23/15	Is the claim subject to offset?			
	Last 4 digits of account number	Yes			
3.13	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$153,618.20		
	Brooks Pierce	☐ Contingent			
	PO Box 26032	☐ Unliquidated ☐ Disputed			
	Greensboro, NC 27420	Basis for the claim: Legal Services	_		
	Date or dates debt was incurred 12/23/15	Is the claim subject to offset?			
	Last 4 digits of account number	☐ No ☐ Yes			
3.14	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$759.80		
	Aman Chandrani	Check all that apply. Contingent	\$759.80		
	2156 34 St. South	☐ Unliquidated ☐ Disputed			
	St Petersburg, FL 33711	Basis for the claim: Commissions Owed			
		Is the claim subject to offset?			
	Date or dates debt was incurred 7/15/16 Last 4 digits of account number	□ No □ Yes			
3.1	5 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$21,838.00		
	Chase Bank,	☐ Contingent ☐ Unliquidated			
	P.O. Box 1423,	☐ Disputed			
	Charlotte, NC 28201	Basis for the claim: _Credit Card			
	Date or dates debt was incurred 4/16	Is the claim subject to offset? ☐ No			
	Last 4 digits of account number	Yes	A STATE OF THE STA		
3.10	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,548.07		
	Carl Curry	Check all that apply. Contingent			
	900 E Main St. Ste. A	☐ Unliquidated ☐ Disputed			
	Laurens SC 29360	Basis for the claim: Commissions Owed			
The second secon	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?			
	Last 4 digits of account number	☐ No ☐ Yes			
3.1	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$240,000.00		
	Scott Curtis,	☐ Contingent			
	951 Ben Black Road,	☐ Unliquidated ☐ Disputed			
	Midland, NC 28107	Basis for the claim: Loans			
Name of Street	Date or dates debt was incurred 9/1/15	Is the claim subject to offset?			
	Last 4 digits of account number	☐ No ☐ Yes			
Same		the state of the s			

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Part 2:

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Na	ame				

Additional Page

	py this page only if more space is needed. Continue numbering vious page. If no additional NONPRIORITY creditors exist, do	Amount of claim	
3.18	Nonpriority creditor's name and mailing address Paul Davis 2904 Halifax Rd.	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Liquidated and neither contingent nor disputed	\$_908.48
		Basis for the claim: Commissions Owed	-
	South Boston VA 24592 Date or dates debt was incurred 7/15/16 Last 4 digits of account number	Is the claim subject to offset? ☐ No ☐ Yes	
3.19	Nonpriority creditor's name and mailing address Denise Davis 907 Oak Street	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$730.29
	Jourdanton TX 78026	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred 7/15/16 Last 4 digits of account number	Is the claim subject to offset? ☐ No ☐ Yes	
3.20	Nonpriority creditor's name and mailing address Eulalio Diaz 121 W Main St Suite B	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$13,955.12
	Uválde TX 78801	Basis for the claim: Commissions Owed	-
	Date or dates debt was incurred7/15/16 Last 4 digits of account number	Is the claim subject to offset? ☐ No ☐ Yes	
3.21	Nonpriority creditor's name and mailing address Ryan Dodson 3576 Summerfield Lane	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$2,969.74
	Winston-Salem NC 27106	Basis for the claim: Commissions Owed	-
	Date or dates debt was incurred7/15/16 Last 4 digits of account number	Is the claim subject to offset? ☐ No ☐ Yes	
2.00	Name of the second seco		No. of All Parks of the Control of t
3.22	Nonpriority creditor's name and mailing address Linda Dunlap	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated	\$1,428.45
	259 Putnam Church Rd.	☐ Disputed	
	Carthage NC 28327	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred 7/15/16 Last 4 digits of account number	Is the claim subject to offset? ☐ No ☐ Yes	

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The Benefit Corner, LLC_

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3.	List in alphabetical order all of the creditors with nonpriority ur	creditors with nonpriority	
	unsecured claims, fill out and attach the Additional Page of Part 2.		Amount of claim
3.23	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$3,030.26
	Eric Elder	Contingent Unliquidated	
	717 N Slappey Blvd. Ste. B	☐ Disputed	
	Albany GA 31701	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	Yes	
3.24	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,772.05
	Deric Felts	Check all that apply. Contingent	42,772.00
LO-Resident	1011 Panasukania Ava	Unliquidated Disputed	
	1911 Pennsylvania Ave.		
	Kannapolis NC 28083	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	Yes	
3.25	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$16,503.00
	Fulton Bank,	Check all that apply. Contingent	\$10,000.00 <u></u>
	One Penn Square,	Unliquidated Disputed	
		Basis for the claim: _Credit Card	
	Lancaster, PA 1760_	Is the claim subject to offset?	
	Date or dates debt was incurred4/16	□ No	
	Last 4 digits of account number	Yes	
3.26	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$1,300.68
	Catherine Garcia	☐ Contingent☐ Unliquidated	
	12117 Armenia Gables Circle	☐ Disputed	
	Tampa FL 33612	Basis for the claim: Commissions Owed	
P. C.	Date or dates debt was incurred7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	☐ No ☐ Yes	
3.2	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$8,970.12
	Gail Graves	Check all that apply. Contingent	+-,
The section of the se	4411 Gate City Blvd #105	Unliquidated Disputed	
	Greensboro NC 27407	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	□ No □ Yes	
2 2	Nonpriority creditor's name and mailing address		
3.20		As of the petition filing date, the claim is: Check all that apply.	\$2,011.20
	Bill Griswold	☐ Contingent☐ Unliquidated	
	2219 Boulevard	☐ Disputed	
	Cotonial Heights VA 23834	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?	
1	Last 4 digits of account number	No V	

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The Benefit Corner, LLC_

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Part 2:	Additional	Page
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bre	vious page. If no additional NONPRIORITY creditors ex	not as not in out or sustine the page.	Manufacture of the second of t
3.29	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Liquidated and neither contingent nor disputed Basis for the claim:	\$
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	No Yes	
3.30	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
		Basis for the claim:	
	Date or dates debt was incurred Last 4 digits of account number	Is the claim subject to offset? ☐ No ☐ Yes	
3.31	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
		Basis for the claim:	<u> </u>
	Date or dates debt was incurred Last 4 digits of account number	Is the claim subject to offset? ☐ No ☐ Yes	
3.32	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
		Basis for the claim:	_
	Date or dates debt was incurred Last 4 digits of account number	Is the claim subject to offset? ☐ No ☐ Yes	
3.33	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
	Date or dates debt was incurred Last 4 digits of account number	Basis for the claim: Is the claim subject to offset? No Yes	

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Name	Sass Harrison (Amount)	
Part 2: List All Creditors with NONPRIORITY Unse	cured Claims	
List in alphabetical order all of the creditors with nonpriounsecured claims, fill out and attach the Additional Page of F		n 6 creditors with nonpriority
		Amount of claim
.29 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$20,000.00
Michael Guerra,	Contingent Unliquidated	
3535 S Memorial Drive,	Disputed	
Greenville, NC 2783	Basis for the claim: Loan	
Date or dates debt was incurred 11/20/15	ls the claim subject to	
Last 4 digits of account number	- sets	
.30 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$_14,039.91
Michael Guerra,	☐ Contingent☐ Unliquidated	
3535 S Memorial Drive,	☐ Disputed	
Greenville, NC 2783_	Basis for the claim: Commissions Owed	_
Date or dates debt was incurred 7/15/16	Is the claim subject to offset? ☐ No	
Last 4 digits of account number	Yes	
.31 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$15,369.73
Hawaiian Airlines Bank,	Contingent Unliquidated	
3375 Koapaka Street,	Disputed	
Honolulu, HI 96819	Basis for the claim: Credit Card	_
Date or dates debt was incurred 4/16	Is the claim subject to offset? ☐ No	
Last 4 digits of account number	Yes	
.32 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$726.26
Ed Hepler	Check all that apply. Contingent	
5073 Newpark Dr.	☐ Unliquidated☐ Disputed	
Acworth GA 30101	Basis for the claim: Commissions Owed	
7/45/40	Is the claim subject to offset?	
Date or dates debt was incurred 7/15/16	No Yes	
3.33 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	45.544.44
Bill Hillman	Check all that apply. Contingent	\$5,582.68
1921 E Broad St.	Unliquidated Disputed	
Statesville NC 28625	Basis for the claim: Commissions Owed	_
Date or dates debt was incurred 7/15/16	Is the claim subject to offset?	
Last 4 digits of account number	☐ No ☐ Yes	
3.34 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	0510.01
Michael Holmes	Check all that apply. Contingent	\$546.64
410 Woodway Forest	Unliquidated Disputed	
	_ 5.555.55	

No Yes

Basis for the claim: Commissions Owed_

Is the claim subject to offset?

ΤX

Date or dates debt was incurred

Last 4 digits of account number

78216

7/15/16_

Michael Holmes 410 Woodway Forest San Antonio

Debtor

Part 2:

Additional Page

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3.35	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Liquidated and neither contingent nor disputed Basis for the claim: Is the claim subject to offset?	\$
	Date or dates debt was incurred Last 4 digits of account number	No Pyes	
	Last 4 digits of account number	LI Tes	
3.36	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
		Basis for the claim:	_
	Date or dates debt was incurred	Is the claim subject to offset? ☐ No	
	Last 4 digits of account number	Yes	
3.37	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
		Basis for the claim:	
	Date or dates debt was incurred	Is the claim subject to offset?	
7	Last 4 digits of account number	Yes	
3.38	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
		Basis for the claim:	_
A CARLO MATE AND	Date or dates debt was incurred Last 4 digits of account number	Is the claim subject to offset? □ No □ Yes	
3.39	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
100 A.A. V. 400 A. V. 100 A. A.		Basis for the claim:	
TO TO TO THE PARTY OF THE PARTY	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	Yes	

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The Benefit Corner, LLC_

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Case number (if known)	10-	11051	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3.	List in alphabetical order all of the creditors with nonpriority ur	nsecured claims. If the debtor has more than 6	creditors with nonpriority
	unsecured claims, fill out and attach the Additional Page of Part 2.		Amount of claim
3.35	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent	\$1,576.51
	Dakara Huffman 866 Tall Deer Drive	Unliquidated Disputed	
	Fairburn GA 30213	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?	
L	Last 4 digits of account number	Yes	
3.3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$636.00
	Jennifer Hursey	☐ Contingent ☐ Unliquidated	
	5020 Ferrell Pkwy #205-153	☐ Disputed	
	Virginia Beach VA 23464	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred _7/15/16	Is the claim subject to offset? ☐ No	
	Last 4 digits of account number	Yes	
3.3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$175,000.00
	JC Squared,	☐ Contingent ☐ Unliquidated	
	7925 Black Cherry Court,	Disputed	
	Harrisburg, NC 28075	Basis for the claim: Loan	
	Date or dates debt was incurred 3/26/15	Is the claim subject to offset?	
	Last 4 digits of account number	Yes	
3.3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$16,083.30
THE REAL PROPERTY OF THE PERTY	Kabbage,	☐ Contingent ☐ Unliquidated	
T 1000	925B Peachtree Street NE #1688,	Disputed	
	Atlanta, GA 30309	Basis for the claim: Loan	
	Date or dates debt was incurred 3/2/16	Is the claim subject to offset?	
	Last 4 digits of account number	☐ No ☐ Yes	
3.3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$720.38
	Brian Kutayiah	☐ Contingent	
	188 Hempstead Ave	☐ Unliquidated ☐ Disputed	
	Lynbrook NY 11563	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?	
Auto and an annual	Last 4 digits of account number	Yes	
3.4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$47,901.60
	Scott Kirk	Contingent Unliquidated	
	1332 North Main St.	☐ Disputed	
	Fort Worth TX 76164	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset? ☐ No	
	Last 4 digits of account number	Yes	

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The Benefit Corner, LLC_

Case number (if kno

Part 2: Additional Page	
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TAX TRANSPORTER	py this page only if more space is needed. Continue numbering vious page. If no additional NONPRIORITY creditors exist, do	Amount of claim	
3.41	Nonpriority creditor's name and mailing address Chris Landis	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$42,678.15
	5620 Concord PKWY South Suite 203	Liquidated and neither contingent nor disputed	
	Concord NC 28027	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	Yes	
3.42	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$25,000.00
	Chris Landis, 5620 Concord Parkway South Suite 203,	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Concord, NC 28027	Basis for the claim:Loan	
	D. () . ()	Is the claim subject to offset?	
	Date or dates debt was incurred3/9/15 Last 4 digits of account number	□ No □ Yes	
3.43	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
	Seung Lee	Check all that apply. Contingent Unliquidated	\$_4,295.91
	3921 Apache Trail	☐ Disputed	
	Antioch TN 37013	Basis for the claim: Commissions Owed	-
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset? ☐ No	
	Last 4 digits of account number	Yes	
3.44	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$1,037.80
-	Raiph Lowther	Check all that apply. Contingent	
	3396 Hwy. 101 N.	☐ Unliquidated ☐ Disputed	
	Rockmart GA 30153	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	□ No □ Yes	
3.45	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
	Meghan Martz	Check all that apply. Contingent	\$483.20
	177 Poplar Drive	☐ Unliquidated ☐ Disputed	
	MorgantownWV 26505	Basis for the claim:Commissions Owed	_
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?	
######################################	Last 4 digits of account number	☐ No ☐ Yes	
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The Benefit Corner, LLC_ Name

Pa	art 2: List All Creditors with NONPRIORITY Unsec	ured Claims	
3.	List in alphabetical order all of the creditors with nonpriori unsecured claims, fill out and attach the Additional Page of Pa		6 creditors with nonpriority
			Amount of claim
3.46	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent	\$384.00
	Teena Mermans 332 Tindal Rd.	☐ Unliquidated ☐ Disputed	
	Pelion SC 29123	Basis for the claim:Commissions Owed	
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	□ No □ Yes	
3.47	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$12,232.85
	Mike Morrell	☐ Contingent☐ Unliquidated	
	4510 Sugartree Drive W	☐ Disputed	
	Lakeland FL 33813	Basis for the claim: Commissions Owed	-
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset? ☐ No	
	Last 4 digits of account number	Yes	- Laboratoria de la companyo de la c
3.4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$539.03
	Eugene Nadeau	☐ Contingent ☐ Unliquidated	
	6 Rock Island Circle	☐ Disputed	
	Wichita Falls TX 76308	Basis for the claim: Commissions Owed	-
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset? ☐ No	
	Last 4 digits of account number	Yes	
3.49	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$540.00
	Dean Norton	☐ Contingent ☐ Unliquidated	
	2532 Nashville HWY	Disputed	
	Columbia TN 38401	Basis for the claim:Commissions Owed	_
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset? ☐ No	
	Last 4 digits of account number	Yes	
3.50	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$10,000.00
	Steve Oaks,	Check all that apply. Contingent	
	63 Starboard Court,	☐ Unliquidated☐ Disputed	
	Ridgeley, WV 26753	Basis for the claim: Loan	_
600 M	Date or dates debt was incurred 6/1/15	Is the claim subject to offset?	
	Last 4 digits of account number	☐ No ☐ Yes	
3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$2,353.42
Г	Nicole Ossenfort	Check all that apply. Contingent	92,000.42
	4161 Augusta Drive	Unliquidated Disputed	
	Rapid City SD 57703	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred7/15/16	Is the claim subject to offset?	
1000000	Last 4 digits of account number	☐ No ☐ Yes	

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Part 2:

The Benefit Corner, LLC_Name

Additional Page

	py this page only if more space is needed. Continue no vious page. If no additional NONPRIORITY creditors ex		Amount of claim
3.52	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Liquidated and neither contingent nor disputed	\$
		Basis for the claim:	_
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	── □ No □ Yes	
3.53	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
		Basis for the claim:	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	No Yes	
	Last 4 digits of account fidinger	Tes .	
3.54	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
		Basis for the claim:	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	No Yes	
	Last 4 digits of account number	u Tes	
3.55	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$
	-	Basis for the claim:	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	─── No Yes	
	Last 4 digits of decount number	u les	
3.56	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated	\$
		Disputed	
	·	Basis for the claim:	<u> </u>
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	No Yes	

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Debtor

The Benefit Corner, LLC_

Pa	art 2: List All Creditors with NONPRIORIT	Y Unsecured Claims	
3.	List in alphabetical order all of the creditors with unsecured claims, fill out and attach the Additional I	nonpriority unsecured claims. If the debtor has more than age of Part 2.	and the second s
			Amount of claim
3.52	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$1,587.23
	Joanna Parichkov	Contingent Unliquidated	
	235 W Brandon Blvd #175	☐ Disputed	
	Brandon FL 33511	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred 7/15/16	□ No	
	Last 4 digits of account number	Yes	
3.5	3 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$7,776.22
	PNC Bank,	☐ Contingent☐ Unliquidated	
	300 Fifth Avenue, The Tower at PNC Plaza,	Disputed	
	Pittsburgh, PA 1522	Basis for the claim: Credit Card	
	Date or dates debt was incurred 4/16	□ No	
	Last 4 digits of account number	Yes	
3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$4,521.54
	Reed Prevatte	☐ Contingent☐ Unliquidated	
	806 Granville Dr.	☐ Disputed	
	Winston-Salem NC 27101	Basis for the claim: Commissions Owed	_
	Date or dates debt was incurred 7/15/16	ls the claim subject to offset? ☐ No	
	Last 4 digits of account number	No Yes	
3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$58,673.11
	Dennis Pryor	☐ Contingent	
	391 S Wheeler	☐ Unliquidated ☐ Disputed	
	Jasper TX 75951	Basis for the claim: Commissions Owed	
		Is the claim subject to offset?	
	Date or dates debt was incurred 7/15/16	No	
	Last 4 digits of account number	Yes	
3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$100,000.00
	Dennis Pryor	☐ Contingent☐ Unliquidated	
	391 S Wheeler	☐ Disputed	
	Jasper TX 75951	Basis for the claim: Loan	_
	Date or dates debt was incurred 10/7/15	Is the claim subject to offset?	
	Last 4 digits of account number	No ☐ Yes	
3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$250.60
	K Redding	Check all that apply. Contingent	\$359.60
	3801 Plank Road Suite B	Unliquidated	
	Fredericksburg VA 22407	Disputed	
		Basis for the claim: Commissions Owed	
	Date or dates debt was incurred7/15/16_	── U No	
	Last 4 digits of account number	Yes	

Part 2: Additional Page

	py this page only if more space is needed. Continue nu vious page. If no additional NONPRIORITY creditors ex		Amount of claim
pre	wious page. If no additional NONPRIORITY creditors ex	ist, do not ill out or submit this page.	
3.58	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	•
		Check all that apply. ———— Contingent	\$
		☐ Unliquidated	
		Disputed	
		Liquidated and neither contingent nor disputed	
		Basis for the claim:	and the second s
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	── ☐ No ☐ Yes	
3.59	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
		Check all that apply.	\$
		Contingent Unliquidated	
		Disputed	
		Basis for the claim:	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	□ No □ Yes	
	Last 4 digits of account number	☐ Yes	
3.60	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
		Check all that apply.	\$
		Contingent Unliquidated	
		Disputed	
		Basis for the claim:	
		Is the claim subject to offset?	
	Date or dates debt was incurred	No	
	Last 4 digits of account number	Yes	
3.61	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	
		Check all that apply.	\$
		Contingent Unliquidated	
		Disputed	
		Basis for the claim:	_
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	── □ No □ Yes	
	Last 4 digits of account number	Yes	
3.62	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A
	•	Check all that apply.	\$
		Contingent	
		Unliquidated Disputed	
		Basis for the claim:	
	Date or dates debt was incurred	Is the claim subject to offset?	
		No	
	Last 4 digits of account number	☐ Yes	

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Debtor

The Benefit Corner, LLC_

3. List in alphabetical order all of the creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2	unsecured claims. If the debtor has more than	n 6 creditors with nonpriority	
unsecured claims, the out and attach the Additional Page of Part 2	2.	Amount of claim	
3.58 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$_1,979.54	
Carrolle Ryan	☐ Contingent		
10733 Footprint Lane	Unliquidated Disputed		
Port Richey FL 34668	Basis for the claim: Commissions Owed	_	
Date or dates debt was incurred 7/15/16	Is the claim subject to offset? ☐ No		
Last 4 digits of account number	Yes		
3.59 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$13,798.87	
David Schuck	☐ Contingent ☐ Unliquidated		
2606 Phoenix Drive Suite 408	Disputed		
Greensboro NC 27406	Basis for the claim: Commissions Owed	-	
Date or dates debt was incurred 7/15/16	Is the claim subject to offset?		
Last 4 digits of account number	☐ No ☐ Yes		
3.60 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$35,000.00	
Smith Leonard,	Check all that apply. Contingent	\$35,000.00	-
4035 Premier Drive #300,	☐ Unliquidated☐ Disputed		
High Point, NC 27265			
right only the Ereso	Basis for the claim: Accounting Services	-	
Date or dates debt was incurred6/29/16	Is the claim subject to offset?		
Last 4 digits of account number	Yes		
3.61 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$50,000.00	
Teresa Small,	Check all that apply. Contingent		
695 Sleepy Hollow Road,	☐ Unliquidated ☐ Disputed		
Midland, NC 28107	•		
	Basis for the claim: Loan	_	
Date or dates debt was incurred 5/14/15	Is the claim subject to offset?		
Last 4 digits of account number	□ No □ Yes		
3.62 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$200,000.00	
Melanie Soles,	Check all that apply. Contingent		
7 St. Augustine Square,	☐ Unliquidated ☐ Disputed		
Greensboro, NC 27408	Basis for the claim: Loan		
	Is the claim subject to offset?	-	
Date or dates debt was incurred 12/18/15 Last 4 digits of account number	□ No		
	Yes		
3.63 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$5,877.20	
Kay Gergel	Contingent Unliquidated		
7011 Edenderry Drive	☐ Disputed		
Charlotte NC 28270 39497.49	Basis for the claim: Commissions Owed		

☐ No☐ Yes

Is the claim subject to offset?

Date or dates debt was incurred

Last 4 digits of account number

7/15/16

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Debtor

The E	Benefit	Corner,	LLC			

COLLEGE CHAIRS	py this page only if more space is needed. Continue number in evious page. If no additional NONPRIORITY creditors exist, do		Amount of claim
3.64	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent	\$3,651.59
	Mary Stephenson 117 N. Myrtle School Road Suite 120	☐ Unliquidated☐ Disputed☐ Liquidated and neither contingent nor disputed	
	•	Basis for the claim: Commissions Owed	
	Gastonia NC 28052 Date or dates debt was incurred7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	□ No □ Yes	
3.65	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$812.41
	Will Sumpter	Check all that apply. Contingent	\$012.41
	3439 Spencer Heights Pl.	☐ Unliquidated☐ Disputed	
	Lenoir NC 28645	Basis for the claim: Commissions Owed	-
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset? ☐ No	
	Last 4 digits of account number	Yes	
3.66	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$13,128.74
	Karen Swicegood 256 Lakeview Road	Check all that apply. Contingent Unliquidated Disputed	910,120.74
		•	
		Basis for the claim: Commissions Owed Is the claim subject to offset?	-
	Date or dates debt was incurred 7/15/16 Last 4 digits of account number	□ No □ Yes	
3.67	Nonpriority creditor's name and mailing address		
5.07		As of the petition filing date, the claim is: Check all that apply.	\$2,104.64
	Mike Thompson	☐ Contingent☐ Unliquidated☐ Disputed	
	4215 70th St. Cir E	☐ Disputed	
	Palmetto FL 34221	Basis for the claim: Commissions Owed Is the claim subject to offset?	-
	Date or dates debt was incurred 7/15/16	☐ No ☐ Yes	
3.68	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$86.94
	Jerel Tomasello	Check all that apply. Contingent Unliquidated	
	23110 State Road 54 #325	Disputed	
	Lutz FL 33549	Basis for the claim: Commissions Owed	_
	Date or dates debt was incurred7/15/16	Is the claim subject to offset?	

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Debtor

The Benefit Corner, LLC_

Part 2:	List All Creditors wi	th NONPRIORITY Unsecured	l Claims

3.	List in alphabetical order all of the creditors with nonpriority usunsecured claims, fill out and attach the Additional Page of Part 2.	nsecured claims. If the debtor has more than	6 creditors with nonpriority
	unsecured claims, fill out and attach the Additional Page of Part 2.		Amount of claim
3.69	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$1,058.40
	Sara VanGraefschepe	☐ Contingent ☐ Unliquidated ☐ Disputed	
	3130 Saint Bury Ct		
	Rapid City SD 57703	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	Yes	
3.70	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$50,000.00
	Antonio and Susie Vargas,	☐ Contingent☐ Unliquidated☐ Disputed☐	
	60-63 Myrtle Ave,	•	
	Ridgewood, NY 11385	Basis for the claim: Loan	-
	Date or dates debt was incurred 9/22/15	Is the claim subject to offset?	
	Last 4 digits of account number	Yes	
3.71	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$3,299.95
	Grace White	Contingent Unliquidated	
	1532 Dittmer Circle SE.	☐ Disputed	
	Palm Bay FL 32909	Basis for the claim: Commissions Owed	-
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	☐ Yes	
3.72	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	s
		Check all that apply. Contingent	7
		☐ Unliquidated ☐ Disputed	
		Basis for the claim:	
		Is the claim subject to offset?	
	Date or dates debt was incurred	□ No	
	Last 4 digits of account number	Yes	
3.7	B Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$425.60
	Bryan Williams	Contingent Unliquidated	
	97 Chestnut Oak Court	☐ Disputed	
	Front Royal VA 22630	Basis for the claim:Commissions Owed	
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	Yes	
3.74	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$5,011.52
	Mark Williams	Check all that apply. Contingent	
	123 S. Herlong Ave.	☐ Unliquidated ☐ Disputed	
	Rock Hill SC 29732	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	□ No □ Yes	
			AND AND AND ADDRESS OF THE ADDRESS O

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Debtor

Part 2: Additional Page

The Benefit Corner, LLC_____

	py this page only if more space is needed. Continue numberin vious page. If no additional NONPRIORITY creditors exist, do		Amount of claim
3.75	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$90,000.00
	Mark Williams,	☐ Contingent ☐ Unliquidated ☐ Disputed	
	123 S Herlong Ave,	☐ Liquidated and neither contingent nor disputed	
	Rock Hill, SC 2973	Basis for the claim: Loan	
	Date or dates debt was incurred6/29/15	Is the claim subject to offset?	
	Last 4 digits of account number	☐ Yes	
3.76	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$683.83
	Chris Wulforst	☐ Contingent	
	476 Inman Road	☐ Unliquidated ☐ Disputed	
	Inman SC 29349	Basis for the claim: Commissions Owed	
	Date or dates debt was incurred 7/15/16	Is the claim subject to offset?	
	Last 4 digits of account number	☐ No ☐ Yes	
3.77	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$
		☐ Contingent ☐ Unliquidated	
	·	Disputed	
		Basis for the claim:	_
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	Yes	
3.78	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	•
		Check all that apply. Contingent	\$
		Unliquidated Disputed	
		Basis for the claim:	-
	Date or dates debt was incurred Last 4 digits of account number	□ No □ Yes	
		u Tes	
3.79	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$
		Crieck all that apply. Contingent Unliquidated Disputed	
	Para and data debtara transport	Basis for the claim:	
	Date or dates debt was incurred Last 4 digits of account number	No Yes	

Debtor

Part 3: List Others to Be Notified About Unsecured Claims

Name and mailing address	rela		line in Part 1 or Part 2 is the editor (if any) listed?	Last 4 digits of account number, it any
The second of th	Line			
		Not li	sted. Explain	
AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	Line			agger en egypyer sinder desidet herhold dyn yng dy dydag de'n geddir diwndian gennae ga en ddei hefen
		Not li	sted. Explain	
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			sted. Explain	
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		Not li	sted. Explain	
	Line			
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			sted. Explain	
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	U	Not li	sted. Explain	
	······			
	U	Not li	sted. Explain	
		-	_	
		Not li	sted. Explain	
	Line			
			sted. Explain	

Official Form 206E/F

	me and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed? Last 4 dig account if any	
		Line Not listed. Explain	
		Line Not listed. Explain	
		Line Not listed. Explain	
		Line Not listed. Explain	
		Line Not listed. Explain	10 th years and the second of the
		Line Not listed. Explain — —	
		Line Not listed. Explain	Hannelentere weren en en e
		Line Not listed. Explain	WATER TO PARTY
		Line Not listed. Explain —	
-		Line Not listed. Explain	
		Line Not listed. Explain — —	Sanda Sanda Memoria de
		Line Not listed. Explain	
		Line Not listed. Explain	
		Line Not listed. Explain	

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The Benefit Corner, LLC Case number (# known) 6- 11027

Part 4	Total Amounts of the Priority and Nonpriority Unsecured Claims			
5. Add	the amounts of priority and nonpriority unsecured claims.			
				Total of claim amounts
5a. Tota	claims from Part 1	5a.	\$_0_	
5b. Tot a	claims from Part 2	5b.	+	\$1,627,055.05
	of Parts 1 and 2 s 5a + 5b = 5c.	5c.		\$1,627,055.05

Fill	in this information to identify t	the case:			
Debt	or name The Benefit Corner, LLC_				
Unite	ed States Bankruptcy Court for the:M	iddle District of North Carolina			
			(State)		
Case	ti known).	Chapter .			
					Check if this is an
					amended filing
Off	icial Form 206G				
Sc	hedule G: Exec	utory Contracts a	and Un	expired Leases	12/15
				the additional page, numbering th	e entries consecutively.
De as	o complete and decurate do po	oolbic. If file to opace to fleedad, ou	py and annual	, and a a a a a a a a a a a a a a a a a a	•
	•	cutory contracts or unexpired lease			- this faces
. (Yes. Fill in all of the information			ules. There is nothing else to report o in <i>Schedule A/B: Assets - Real and P</i>	
1000	Form 206A/B).		Sta	te the name and mailing address fo	or all other parties with
Z. L	ist all contracts and unexpire	ureases	wh	om the debtor has an executory co	ntract or unexpired lease
	0.1	0.5	Da	ord Croonshare II GSA 11 C	
2.1	State what the contract or lease is for and the nature	Office_Lease		yd Greensboro II GSA, LLC 0 W. Monroe St. Suite 3850	
	of the debtor's interest			icago, IL 60661-3798	
	State the term remaining	_9/30/20			
	List the contract number of any government contract				
					Market 1 (4)
2.2	State what the contract or lease is for and the nature				
	of the debtor's interest				the field of the second
	State the term remaining				
	List the contract number of any government contract				
	uny goronimoni contiduo	1			
2.3	State what the contract or lease is for and the nature				
2.3	of the debtor's interest				
	State the term remaining	****			
	List the contract number of		_		
	any government contract				
2.4	State what the contract or				
2.4	lease is for and the nature of the debtor's interest				
-	State the term remaining		_		
	List the contract number of				
	any government contract				
	State what the contract or				
2.5	lease is for and the nature of the debtor's interest	The state of the s			
			_		
	State the term remaining List the contract number of				
1	First tile contract littlinet of				

any government contract

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Fill	in this information to ide	ntify the case:		
Deb	otor name The Benefit Corner,	LLC		
Unit	ted States Bankruptcy Court fo	r the:Middle District of North Carolina		
Cas	se number (If known):	5-11627 (State)		
				_
				Check if this is an amended filing
	ficial Form 206h	<u> </u>		v
Sc	hedule H: Co	odebtors		12/15
	s complete and accurate Additional Page to this pa	as possible. If more space is needed, copy the Additio ge.	nal Page, numbering the entries	consecutively. Attach
	Does the debtor have any		Notice of a second to be seen	and on this form
	Yes	d submit this form to the court with the debtor's other sched	ules. Nothing else needs to be repo	orted on this form.
2	In Column 1, list as code	btors all of the people or entities who are also liable for	r any debts listed by the debtor in	the schedules of
	creditors. Schedules D-G	 Include all guarantors and co-obligors. In Column 2, iden ditor is listed. If the codebtor is liable on a debt to more that 	tify the creditor to whom the debt is	owed and each
	Column 1: Codebtor		Column 2: Creditor	
	Name	Mailing address	Name	Check all schedules that apply:
2.1	Brandon C Adams_	108 Tortuga Bay Drive	Messer Financial Melanie Soles	D E/F
		St. Augustine, FL 32092	Forward Financial	□ G
2.2	James R Hill Jr	7 St Augustine Square	_Messer Financial	□ D
		Greensboro, NC 27408	Fox Capital Melanie Soles	□ E/F □ G
2.3	Scott T Curtis	951 Ben Black Road	Messer Financial	□ D
	_	Midland, NC 28107		□ E/F □ G
2.4	Jerry Todd Swicegood	256 Lakeview	Messer Financial	□ D
				□ E/F □ G
		Mocksville, NC 27028		
2.5			Mary Commence and Association of the Commence	□ D
		Street		□ E/F □ G
				_ -
2.5	three control of the	City State ZIP Code		
2.6		Street		D E/F
				□ G

City

ZIP Code

State

Fill in this information to identify the case:				
Debtor name				
United States Bankruptcy Court for the: Middle	District of NC (State)			
Case number (If known): 16-11027	(State)			

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 12/15

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income					
Gross revenue from business					
☐ None					
Identify the beginning and en may be a calendar year	ding dates of the debtor'	s fisca	l year, which	Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From 01/01/2016 MM / DD / YYYY	to	Filing date	Operating a business Other	\$_659,400.77
For prior year:	From <u>01/01/2015</u> MM / DD / YYYY	to	12/31/2015 MM / DD / YYYY	Operating a business Other	\$_1,028,622.36
For the year before that:	From <u>07/17/2014</u> MM / DD / YYYY	to	12/31/2014 MM / DD / YYYY	Operating a business Other	\$
 Non-business revenue Include revenue regardless of whether that revenue is taxable. Non-business income may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1. None 					
None				Description of sources of revenue	Gross revenue from each source
					(before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From MM/DD/YYYY	to	Filing date		\$0
For prior year:	From MM/DD/YYYY	to	MM / DD / YYYY		\$0
For the year before that:	From MM/DD/YYYY	to	MM/DD/YYYY		\$0

Debtor

The Benefit Corner, LLC	_

Case number (if known)	16-11027	

ertain payments	or transfers to cree	ditors within 9	00 days before f	iling this case				
ist payments or tra	payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,225. (This amount may be							
ays before filing thi diusted on 4/01/16	s case unless the a and every 3 years	iggregate value after that with	e of all property to respect to cases	ransferred to that creditor filed on or after the date o	is less th f adjustr	nent.)		
_	and over, o years		,		•			
☐ None			Landenium v. 1 m. m. v. 1911	annimizer was superior and formation				
Creditor's nam	e and address		Dates	Total amount or value		ons for payment or transfer		
11 2.1 4 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	VARIABLY WE BETTER				Chec	k all that apply		
Fox Financial			Daily 6/2916-	\$_14,279		Secured debt		
Creditor's name			7/29/16			Unsecured loan repayments		
242 VV. 36th S Street	treet 14th Floor					Suppliers or vendors		
New York, NY	10018					Services		
City	State	ZIP Code				Other		
Ony	Oldio	211 0000						
3.2. Kabbage				7 100 00		Secured debt		
Creditor's name				\$7,166.68		Unsecured loan repayments		
	ree Street NE #1688					Suppliers or vendors		
Street						Services		
Atlanta	GA.		6/30/16; 8/1/16					
City	State	ZIP Code				Other		
	d List of Additional							
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Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3.3	Forward Financing 36 Bromfield St. Boston, MA 02108	6/29/16-7/29/16	\$11,078.54	Loan Payments
4.3	James R Hill, Jr 7 St Augustine Square Greensboro, NC 2740		\$185,160.70 \$28,000.00	Expense Reimbursements Salary
4.4	Jerry Todd Swicegood 256 Lakeview Mocksville. NC 27028	4/24/15-11/3/16	\$52,554.68 \$42,500.00	Commissions Partner Guaranteed Payment

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Debtor

or The Benefit Cor	ner, LLC		Case number (# known)	16-110	2
	ebtor that was obtain	ned by a creditor within 1 y	year before filing this case, including pr		
None					
Creditor's name and	address	Description of	the property	Date	Value of property
5.1. Storr		Office Furnit	ture	8/31/2016	6 14 000
Creditor's name				0.01,2010	\$14,000
10800 World Trade Street	Blvd				
00000					
Raleigh	NC	27617			
City 5.2.	State Zt	P Code			
7.6.					\$
Creditor's name					
Street					
City	State ZI	P Code			
Setoffs			O days before filing this case set off or c		
Creditor's name					\$
Street					
Street					
			of account number: XXXX	-	
City	State 2	ZIP Code			
nt 3: Legal Action	s or Assignment	s			
	oceedings, investiga	ations, arbitrations, mediat	ions, attachments, or governmental attions, and audits by federal or state age		ebtor
was involved in any cap None Case title		Nature of case	Court or agency's name an	d address	Status of case
was involved in any cap None Case title			<u> </u>	d address	Status of case
was involved in any cap None Case title			Name	d address	Status of case Pending On appeal
was involved in any cap None Case title			<u> </u>	d address	Status of case
was involved in any cap None Case title			Name	d address ZIP Code	Status of case Pending On appeal
Nas involved in any cap None Case title 7.1. Case number		Nature of case	Name Street City State	ZIP Code	Status of case Pending On appeal Concluded
None Case title Case title Case title		Nature of case	Name Street	ZIP Code	Status of case Pending On appeal Concluded
None Case title Case title Case title		Nature of case	Street City State Court or agency's name ar	ZIP Code	Status of case Pending On appeal Concluded Pending On appeal
Nas involved in any cap None Case title Case number Case title		Nature of case	Name Street City State Court or agency's name ar	ZIP Code	Status of case Pending On appeal Concluded
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The Dene fix Corner, LLC Case number (# known) 16-11027

	any property in the hands of an assignee for the be		ing this	case and any proper	ty in the
	ds of a receiver, custodian, or other court-appointed	d officer within 1 year before filing this case.			
1	None				
	Custodian's name and address	Description of the property	Value \$		
	Custodian's name	Case title	-	name and address	
	Street				
		Case number	Name		
	City State ZIP Code	the state of the second	Street		
		Date of order or assignment	City	State	ZIP Code
: 4	: Certain Gifts and Charitable Contribut	tions			
	all gifts or charitable contributions the debtor	gave to a recipient within 2 years before filir	ng this	case unless the agg	regate value
	he gifts to that recipient is less than \$1,000				
	None	2011 1965 30 1 Fugge California 1 (111 61 61 7 1 1 1 1		400.407.41	Administration
	Recipient's name and address	Description of the gifts or contributions		Dates given	Value
					\$
١.	Recipient's name		_		*
	Street		_		
	City State ZIP Code				
	Recipient's relationship to debtor				
2.	Recipient's name				\$
	Recipients name				
	Street		-		
	City State ZIP Code				
	Recipient's relationship to debtor				
	The special section of the section o				
5	Certain Losses				
	osses from fire, theft, or other casualty within 1	year before filing this case.			
1	None a constituint sur superfect de la completa de la servición de la completa del completa de la completa del completa de la completa del			and the second	
	Description of the property lost and how the loss	Amount of payments received for the loss		Date of loss	Value of proper
	occurred	If you have received payments to cover the loss, for example, from insurance, government compensation			lost
	그리는 네. 이리는 나가 하는데 작용하게 얼구 20살이는 얼굴인 안달시다.	tort liability, list the total received.	, 51		
	그 그래 가족이다. 나라보면 걸린 그들 20시간이 다셔?				
		List unpaid claims on Official Form 106A/B (Schedu Assets – Real and Personal Property).	ile A/B:		

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The Benefit Corner, LLC case number (if known) 16-11027

Part 6	Certain Payments or Transfers			
List the		erty made by the debtor or person acting on behalf ding attorneys, that the debtor consulted about deb		
	None			
	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Address			\$
	Street			
	City State ZIP Code			
	Email or website address			
	Who made the payment, if not debtor?			
	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.	Address			\$
	Street			
	City State ZIP Code			
	Email or website address			
	Who made the payment, if not debtor?			
12. Self	settled trusts of which the debtor is a benefici	iary		
a se	any payments or transfers of property made by the elf-settled trust or similar device. not include transfers already listed on this stateme	e debtor or a person acting on behalf of the debtor nt.	within 10 years before the	e filing of this case to
	None			
	Name of trust or device		Dates transfers were made	Total amount or value
				\$
	Trustee			

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The Bere fit Corner, LLC Case number (if known) 16-11027

within 2 years before the filing of this case to another person, other the Include both outright transfers and transfers made as security. Do not None Who received transfer? Description of or debts paid in	
Who received transfer? Description of or debts paid in a content of the paid in the paid	ther means—made by the debtor or a person acting on behalf of the debtor in property transferred in the ordinary course of business or financial affairs. include gifts or transfers previously listed on this statement.
Address Street City State ZIP Code Relationship to debtor Who received transfer? Lity State ZIP Code Relationship to debtor City State ZIP Code Relationship to debtor Previous Locations Previous addresses List all previous addresses used by the debtor within 3 years before filli Does not apply Address 4.1. Street 4411 Gate City Blvd #105 Greensboro NC 27 City State ZIP C	
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Street City State ZIP Code Relationship to debtor Who received transfer? Address Street City State ZIP Code Relationship to debtor Previous Locations Previous addresses List all previous addresses used by the debtor within 3 years before filin Does not apply Address 4.1. Street 4411 Gate City Bivd #105 Greensboro NC 27 City State ZIP Code	see the element for the field of the control of the section of the control of the
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Relationship to debtor Previous Locations Previous addresses List all previous addresses used by the debtor within 3 years before filling Does not apply Address 4.1. Street 4411 Gate City Blvd #105 Greensboro RC Zip C List All State City State Zip C 4.2.	
Previous Locations Previous addresses List all previous addresses used by the debtor within 3 years before filing Does not apply Address 4.1. Street 4411 Gate City Blvd #105 Greensboro City State ZIP C	
Previous addresses List all previous addresses used by the debtor within 3 years before filling Does not apply Address 4.1. Street 4411 Gate City Bivd #105 Greensboro City State ZIP C	
List all previous addresses used by the debtor within 3 years before filing Does not apply Address 4.1. Street 4411 Gate City Blvd #105 Greensboro City State ZIP C	
Does not apply Address 4.1. Street 4411 Gate City Blvd #105 Greensboro City State ZIP C	
### Address 4.1. Street	g this case and the dates the addresses were used.
Street 4411 Gate City Blvd #105	Dates of occupancy
4411 Gate City Blvd #105 Greensboro NC 27 City State ZIP C	From 7/1/2014 To <u>10/1/2015</u>
City State ZIP C	407
	<u></u>
	To
City State ZIP C	de

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Debtor

The Benefit Corner, LLC

Case number (if known) 16 - 11027

	Health Care Bankruptcies		
5. Hea	alth Care bankruptcies		
	he debtor primarily engaged in offering service		
	diagnosing or treating injury, deformity, or dis		
	providing any surgical, psychiatric, drug treat	tment, or obstetric care?	
	No. Go to Part 9.		
	Yes. Fill in the information below.		
	Facility name and address	Nature of the business operation, including type of services the	If debtor provides meals
	A STATE OF THE STA	debtor provides	and housing, number of patients in debtor's care
	and the state of t	7일 등학교 마이 남자는 1. : 1112년 전 사람들에는 이번 등로 가는 경험을 하는 것 같다. 이 전쟁을 하는데 있다고 있다. 	patients in deptor's care
5.1.	English same		
	Facility name		
	Street	Location where patient records are maintained (if different from facility	How are records kept?
	Street	address). If electronic, identify any service provider.	now are records kept?
		-	Check all that apply:
	City State ZIP Code	_	☐ Electronically
	ony one zir oode		Paper
	TERRETARIO DE ANCIA EN PARTE PER LA CARRA DE LA CARRA DEL CARRA DEL CARRA DE LA CARRA DEL CARRA DEL CARRA DE LA CARRA DEL CARRA DE LA CARRA DEL CARRA DE LA CARRA DEL CARRA DE LA CARRA DE LA CARRA DE LA CARRA DEL CARRA DELA		
	Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of
			patients in debtor's care
5.2.			
	Facility name		
	•		
	Street	 Location where patient records are maintained (if different from facility address). If electronic, identify any service provider. 	How are records kept?
		- Company of the second	Check all that apply:
			☐ Electronically
	City State ZIP Code		Paper
			■ Paper
		ion	
rt 9	Personally Identifiable Informati		
	•	identifiable information of customers?	
Doe	es the debtor collect and retain personally i	identifiable information of customers?	
Doe	es the debtor collect and retain personally i		
Doe	es the debtor collect and retain personally in No. Yes. State the nature of the information collect	cted and retained. Insurance applications	
Doe	ns the debtor collect and retain personally in No. Yes. State the nature of the information collect Does the debtor have a privacy policy at	cted and retained. Insurance applications	
Doe	No. Yes. State the nature of the information collect Does the debtor have a privacy policy at	cted and retained. Insurance applications	
Doe	No. Yes. State the nature of the information collect Does the debtor have a privacy policy at No. No. Yes. State the nature of the information collect Does the debtor have a privacy policy at No.	cted and retained. Insurance applications bout that information?	
Doe	No. Yes. State the nature of the information collect Does the debtor have a privacy policy at No No Yes	cted and retained. Insurance applications bout that information? y employees of the debtor been participants in any ERISA, 401(k), 40	3(b), or other
Doe	No. Yes. State the nature of the information collect Does the debtor have a privacy policy at No. No. Yes of the information collect Does the debtor have a privacy policy at No. Yes	cted and retained. Insurance applications bout that information? y employees of the debtor been participants in any ERISA, 401(k), 40	3(b), or other
Doe	No. Yes. State the nature of the information collect Does the debtor have a privacy policy at No. No. Yes of the information collect Does the debtor have a privacy policy at No. Yes No. Yes No. Yes No. General Yes No. Go to Part 10.	cted and retained. Insurance applications bout that information? y employees of the debtor been participants in any ERISA, 401(k), 40 by the debtor as an employee benefit?	3(b), or other
Doe	No. Yes. State the nature of the information collect Does the debtor have a privacy policy at No. No. Yes. State the nature of the information collect Does the debtor have a privacy policy at No. Yes. No. Go to Part 10. Yes. Does the debtor serve as plan administration.	cted and retained. Insurance applications bout that information? y employees of the debtor been participants in any ERISA, 401(k), 40 by the debtor as an employee benefit?	3(b), or other
Doe	No. Yes. State the nature of the information collect Does the debtor have a privacy policy at No. No. Yes. State the nature of the information collect Does the debtor have a privacy policy at No. Yes. No. Yes. No. Go to Part 10. Yes. Does the debtor serve as plan administration.	cted and retained. Insurance applications bout that information? y employees of the debtor been participants in any ERISA, 401(k), 40 by the debtor as an employee benefit?	3(b), or other
Doe	In No. Yes. State the nature of the information collect and personally in No. Yes. State the nature of the information collect and privacy policy at the nature of the information collect and not	cted and retained. Insurance applications bout that information? y employees of the debtor been participants in any ERISA, 401(k), 40 by the debtor as an employee benefit?	
Doe	In the debtor collect and retain personally in the No. Yes. State the nature of the information collect poes the debtor have a privacy policy at the No. In the No. In the Yes of the information collect poes the debtor have a privacy policy at the No. In the No. In the No. In the No. Go to Part 10. Yes. Does the debtor serve as plan administration. In the No. Go to Part 10. Yes. Fill in below:	cted and retained. Insurance applications bout that information? y employees of the debtor been participants in any ERISA, 401(k), 40 by the debtor as an employee benefit? eator? Employer identification no	umber of the plan
Doe	In the debtor collect and retain personally in the No. Yes. State the nature of the information collect poes the debtor have a privacy policy at the No. In the No. In the Yes of the information collect poes the debtor have a privacy policy at the No. In the No. In the No. In the No. Go to Part 10. Yes. Does the debtor serve as plan administration. In the No. Go to Part 10. Yes. Fill in below:	cted and retained. Insurance applications bout that information? y employees of the debtor been participants in any ERISA, 401(k), 40 by the debtor as an employee benefit?	umber of the plan
Doe	In the debtor collect and retain personally in the No. Yes. State the nature of the information collect poes the debtor have a privacy policy at the No. In the No. In the Yes of the information collect poes the debtor have a privacy policy at the No. In the No. In the No. In the No. Go to Part 10. Yes. Does the debtor serve as plan administration. In the No. Go to Part 10. Yes. Fill in below:	cted and retained. Insurance applications bout that information? y employees of the debtor been participants in any ERISA, 401(k), 40 by the debtor as an employee benefit? eator? Employer identification no	umber of the plan
With	No. Yes. State the nature of the information collect Does the debtor have a privacy policy at No. No. Yes State the nature of the information collect Does the debtor have a privacy policy at No. Yes No. Yes No. Go to Part 10. Yes. Does the debtor serve as plan administration. No. Go to Part 10. Yes. Fill in below: Name of plan	cted and retained. Insurance applications bout that information? y employees of the debtor been participants in any ERISA, 401(k), 40 by the debtor as an employee benefit? eator? Employer identification no	umber of the plan

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The Benefit (wher LLC case number (# known) 16-11027

noved, or tra	ansferred? cking, savings, m	oney m	arket, or oth	ancial accounts or instrume er financial accounts; certifi nd other financial institution	cates of deposit; and share		etit, closed, sold,
None							
Financi	al institution name	and ac	ddress	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing o transfer
ı.				XXXX-	☐ Checking		. \$
Name					□ Savings		
Street					☐ Money market		
					□ Brokerage		
City	Stat	е	ZIP Code		Other		
2.				XXXX-	Checking		- \$
Name					☐ Savings		
Street					■ Money market		
					□ Brokerage		
					■ Brokerage		
None	e deposit box or o	ther de		securities, cash, or other va	Other		
afe deposi ist any safe None	it boxes	ther de	epository for	securities, cash, or other va	Other	s or did have within 1 year	Does debt still have i
afe deposist any safe None Depos	it boxes e deposit box or o	ther de	epository for		Other		Does debt still have i
afe deposi ist any safe None	it boxes e deposit box or o	ther de	epository for		Other		Does debt still have i
afe deposist any safe None Depos	it boxes e deposit box or o	ther de	epository for		Other		Does debt still have i ☐ No
afe deposist any safe None Depos Name Street	it boxes e deposit box or o	ther de	apository for	Names of anyone with acc	Other		Does debt still have i
afe deposist any safe None Deposition Name Street City f-premises any proposition	it boxes e deposit box or o sitory institution n Stat	ame and	d address ZIP Code	Names of anyone with acc	Other	on of the contents	Does debt still have i No Yes
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Name Street City f-premises any prophich the del	it boxes e deposit box or o sitory institution n Stat s storage erty kept in storage	ame and	d address ZIP Code	Names of anyone with acc	Other	on of the contents	Does debt still have in the of a building in the of a building in the office of the of
Name Street City f-premises any prophich the del None Name	it boxes e deposit box or o sitory institution n Stat s storage erty kept in stora btor does busines	ame and	d address ZIP Code	Address uses within 1 year before filing	Other	on of the contents	Does debt still have in the property of a building in the property of the prop
Name Street City f-premises st any prophich the del None Facilii	it boxes e deposit box or o sitory institution n Stat s storage erty kept in stora btor does busines	ame and	d address ZIP Code	Address uses within 1 year before filing	Other	on of the contents	Does debt still have in the property of a building in the property of the prop

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The Benefit Corner, LLC Case number (# known) 16-11027

Part 1	11: Property the Debtor Holds or	Controls That the Debtor Does Not Own	
List	pperty held for another t any property that the debtor holds or cont st. Do not list leased or rented property.	trols that another entity owns. Include any property borrowed from, being stored fo	r, or held in
	None		
	Owner's name and address	Location of the property Description of the property	Value
			\$
	Name		_
	Street		_
	City State ZIP Code	.	
	<u> </u>		
Part 1	2: Details About Environmental	Information	
For the	e purpose of Part 12, the following definition	ns apply:	
≡ En		ernmental regulation that concerns pollution, contamination, or hazardous material,	
	e means any location, facility, or property, in merly owned, operated, or utilized.	including disposal sites, that the debtor now owns, operates, or utilizes or that the	debtor
	z <i>ardous material</i> means anything that an e a similarly harmful substance.	environmental law defines as hazardous or toxic, or describes as a pollutant, conta	minant,
Repor	t all notices, releases, and proceedings	known, regardless of when they occurred.	
	No Yes. Provide details below. Case title	or administrative proceeding under any environmental law? Include settleme Court or agency name and address Nature of the case	Status of case
			☐ Pending
	Case number	Name	On appeal
		Street	Concluded
		City State ZIP Code	
env	vironmental law?	ied the debtor that the debtor may be liable or potentially liable under or in v	iolation of an
_	No Yes. Provide details below.		
	Site name and address	Governmental unit name and address Environmental law, if known	Date of notice
	Name	Name	
	Street	Street	
	City State ZIP Code	City State ZIP Code	

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The Benefit Corner, LLC Case number (# known) 16-11027

	Yes. Provide details belo	W.													
	Site name and address			Governme	ntal unit na	me and a	ddress	Er	nvironmen	tal law, if ki	nown		Date	e of not	tice
	Name			Name							-				
	Street			Street			- 1111						_		
			_					_							
	City Stat	ie ZIP (Code	City	;	State	ZIP Code	•							
	_														
1	3: Details About t	he Debt	or's B	usiness o	r Connec	ctions t	o Any Bu	usines	s						
cl	any business for which the subsection of the sub									,			J		
	Business name and addr			Describe to					En Do	ployer Ider not include	ntificat Social	ion numb Security r	oer number (or ITIN.	
									Ell	N:					-
	Name											400	21. BY		
									Da	tes busines	ss exis	tea			
	Street									tes busines			i raki:		
	Street City Stat	te ZIP (Code												
		Else and Wilder	Code	Describe ti					Fro	om	ntificat	To	per	or ITIN	
	City Star	Else and Wilder	Code		ne nature c				Fro Em Do	om iployer Ider not include	ntificat Social	Toion numb Security r	per	or ITIN.	
	City Star	Else and Wilder	Code						Fro En Do Ell	om	ntificat Social	To ion numb Security r	per	or ITIN.	3.77
	City Stat	Else and Wilder	Code						En Do Ell Da	om ployer Ider not include N: tes busines	ntificat Social 	Toion numb Security r	per number (or ITIN.	3.
	City Star Business name and addr Name	Else and Wilder	Code						En Do Ell Da	om iployer Ider not include N:	ntificat Social 	Toion numb Security r	per number (or ITIN.	
	City Star Business name and addr Name	ėss	Code						En Do Ell Da	om ployer Ider not include N: tes busines	ntificat Social 	Toion numb Security r	per number (or ITIN.	
	City State Business name and address Name Street	ëss e ZIP (Enr Do Ell Da Fro	om ployer Ider not include N: tes busines om	ntificat Social ss exis	ion numb Security r ted	per number (
	City Star Business name and addr Name Street City Star	ess e ZIP (Code	Describe ti		of the busi			Em Da Em Do	om iployer Ider not include N: tes busines om	ntificat Social ss exis	ion numb Security r ted	per number (
	City Star Business name and addr Name Street City Star Business name and addr	ess e ZIP (Code	Describe t	he nature o	of the busi			Em Do EII Da Em Do	om uployer Ider not include N: tes busines om uployer Ider not include N:	ntificat Social Ss exis	ion numb	per number (
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Debtor

the	Benefit	Corner	LLC
Name			,

Case number (# known) 16-11027

	None				
Na	ame and address			Dates of service	
				From 8/1/2015	To 8/15/2016
	Tiffany Pulice			-	10
	ame 1169 Mallard Landing Blvd			-	
Str	reet				
	Clemmons	NC	27012	-	
Cit	ty	State	ZIP Code		
Na	ame and address			Dates of service	
					vija est Qeve T
_				From	То
Na	ame				
Str	reet			-	
-				-	
Cit	ty	State	ZIP Code	-	
stat	all firms or individuals who have a tement within 2 years before filing to None Name and address Smith Leonard		d debtor's books of accou	Dates of service	
stat	None Name and address Smith Leonard Name 4035 Premier Drive Suite 300		d debtor's books of accou	Dates of service	
stat	None Name and address Smith Leonard Name		d debtor's books of accou	Dates of service	
stat	Rement within 2 years before filing to None Name and address Smith Leonard Name 4035 Premier Drive Suite 300 Street High Point	his case.	27265	Dates of service	
stat	None Name and address Smith Leonard Name 4035 Premier Drive Suite 300 Street	his case.		Dates of service	
stat	Rement within 2 years before filing to None Name and address Smith Leonard Name 4035 Premier Drive Suite 300 Street High Point	his case.	27265	Dates of service	
stat	Rement within 2 years before filing to None Name and address Smith Leonard Name 4035 Premier Drive Suite 300 Street High Point City	his case.	27265	Dates of service	TO 8/15/6
stat	Rement within 2 years before filing to None Name and address Smith Leonard Name 4035 Premier Drive Suite 300 Street High Point City Name and address	his case.	27265	Dates of service	
stat	Rement within 2 years before filing to None Name and address Smith Leonard Name 4035 Premier Drive Suite 300 Street High Point City Name and address	his case.	27265	Dates of service	TO 8/15/6
stat	Rement within 2 years before filing to None Name and address Smith Leonard Name 4035 Premier Drive Suite 300 Street High Point City Name and address	his case.	27265	Dates of service	TO 8/15/6
stat	Rement within 2 years before filing to None Name and address Smith Leonard Name 4035 Premier Drive Suite 300 Street High Point City Name and address Name Street	NC State	27265 ZIP Code	Dates of service	TO 8/15/6
stat	Rement within 2 years before filing to None Name and address Smith Leonard Name 4035 Premier Drive Suite 300 Street High Point City Name and address	his case.	27265	Dates of service	TO 8/15/6
stat	Rement within 2 years before filing to None Name and address Smith Leonard Name 4035 Premier Drive Suite 300 Street High Point City Name and address Name Street	NC State	27265 ZIP Code	Dates of service From 6/11/15 Dates of service From	To <u>8/15/16</u>
stat	Rement within 2 years before filing to None Name and address Smith Leonard Name 4035 Premier Drive Suite 300 Street High Point City Name and address Name Street	NC State	27265 ZIP Code	Dates of service From 6/11/15 Dates of service From	To <u>8/15/16</u>
stat	Rement within 2 years before filing to None Name and address Smith Leonard Name 4035 Premier Drive Suite 300 Street High Point City Name and address Name Street City all firms or individuals who were in	NC State	27265 ZIP Code	Dates of service From Dates of service From ords when this case i	To \$/15(6) To s filed.
stat	Rement within 2 years before filing to None Name and address Smith Leonard Name 4035 Premier Drive Suite 300 Street High Point City Name and address Name Street City all firms or individuals who were in None Name and address	NC State	27265 ZIP Code	Dates of service From Lilia Dates of service From ords when this case i	To \$/15(6) To s filed.
stat	Rement within 2 years before filing to None Name and address Smith Leonard Name 4035 Premier Drive Suite 300 Street High Point City Name and address Name Street City all firms or individuals who were in None	NC State	27265 ZIP Code	Dates of service From Lilia Dates of service From ords when this case i	To \$/15(6) To s filed.

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The Benefir Corner, LLC 16-11027 Debtor If any books of account and records are Name and address unavailable, explain why 26c.2. Name Street ZIP Code City 26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case. Mone None Name and address 26d.1. Name Street ZIP Code City 26d.2 Name Street ZIP Code City 27. Inventories Have any inventories of the debtor's property been taken within 2 years before filing this case? Yes. Give the details about the two most recent inventories. The dollar amount and basis (cost, market, or Name of the person who supervised the taking of the inventory Date of other basis) of each inventory inventory Name and address of the person who has possession of inventory records

27.1.

Name Street

City

ZIP Code

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the Benefit Corner, LLC 16-11.027 Debtor The dollar amount and basis (cost, market, or Date of Name of the person who supervised the taking of the inventory other basis) of each inventory inventory Name and address of the person who has possession of inventory records 27.2 Name Street City ZIP Code State 28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case. % of interest, if any Position and nature of any Address interest 18.25 President & CEO 108 Tortuga Bay Drive, St Augustine, FL 32092 Brandon Adams Director of Franchisees 18.25 Scott Curtis 951 Ben Black Road, Midland, NC 28107 7 St Augustine Square, Greensboro, NC 27408 Chief Marketing Officer 18.25 James R Hill Jr 6 Roy Messer 4301 Morris Park Drive, Mint Hill, NC 28227 Part Owner 4301 Morris Park Drive, Mint Hill, NC 28227 William Rice 6 Part Owner 29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions? ☐ No Yes. Identify below. Period during which Address Position and nature of Name any interest position or interest was From 7/14 To 12/15 Chief Marketing Officer 256 Lakeview, Mocksvile, NC 27028 Jerry Todd Swicegood From _ To _ From _ To _ То From 30. Payments, distributions, or withdrawals credited or given to insiders Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised? No ☐ Yes. Identify below. Reason for Name and address of recipient Amount of money or providing the value description and value of 30.1 Name Street City State ZIP Code Relationship to debtor

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Name	and address of recipient			6.74 3.35 3.35 3.75 3.75 3.75			
Name		-	***************************************				
Street							
City		State	ZIP Code				
Relati	onship to debtor			Á.			
nin 6 ye	ars before filing this case, has	the debtor	been a member o	f any consolida	ted group for tax	purposes?	
No							
Yes. Ide	entify below.					والمناطقة والمتعودة	da Linna II.
5-52697							the narent
	of the parent corporation				Employer Identifi corporation		
hin 6 ye No Yes. Ide		the debtor	as an employer b	een responsible	EIN:	to a pension fu	ind?
hin 6 ye No Yes. Ide	ars before filing this case, has	the debtor	as an employer b	een responsible	EIN:	to a pension fu	ind?
hin 6 ye No Yes. Ide	ars before filing this case, has	the debtor	as an employer b	een responsible	EIN:	to a pension fu	ind?
hin 6 ye No Yes. Idd Name	ars before filing this case, has entify below.	the debtor	as an employer b	een responsible	EIN:	to a pension fu	ind?
hin 6 ye No Yes. Idd Name	ars before filing this case, has	the debtor	as an employer b	een responsible	EIN:	to a pension fu	ind?
hin 6 ye No Yes. Idd Name	ars before filing this case, has entify below. of the pension fund Signature and Declaration				EIN:	to a pension fu	ind?
hin 6 ye No Yes. Idd Name	ars before filing this case, has entify below. of the pension fund Signature and Declaration	ious crime. N	Making a false stat	ement, concealin	EIN: e for contributing Employer Identifit EIN:	to a pension fu	ind?
hin 6 ye No Yes. Idd Name	ars before filing this case, has entify below. of the pension fund Signature and Declaration	ious crime. N	Making a false stat	ement, concealin	EIN: e for contributing Employer Identifit EIN:	to a pension fu	ind?
hin 6 ye No Yes. Idd Name	ars before filing this case, has entify below. of the pension fund Signature and Declaration ING Bankruptcy fraud is a seristion with a bankruptcy case can .C. §§ 152, 1341, 1519, and 357	ious crime. N result in fines	Making a false stats up to \$500,000 c	ement, concealin	EIN: e for contributing Employer Identifit EIN: g property, or obtator up to 20 years, or	to a pension fu	ind? If the pension fund property by fraud
hin 6 ye No Yes. Idd Name	ars before filing this case, has entify below. of the pension fund Signature and Declaration ING Bankruptcy fraud is a seriction with a bankruptcy case can	ious crime. N result in fines	Making a false stats up to \$500,000 c	ement, concealin	EIN: e for contributing Employer Identifit EIN: g property, or obtator up to 20 years, or	to a pension fu	ind? If the pension fund property by fraud
hin 6 ye No Yes. Idd Name	ars before filing this case, has entify below. of the pension fund Signature and Declaration ING Bankruptcy fraud is a seriction with a bankruptcy case can. C. §§ 152, 1341, 1519, and 357 examined the information in this	ious crime. In result in fines	Making a false stats s up to \$500,000 c	ement, concealing imprisonment for impri	EIN: e for contributing Employer Identifit EIN: g property, or obtator up to 20 years, or	to a pension fu	ind? If the pension fund property by fraud
hin 6 ye No Yes. Idd Name WARN connect 18 U.S I have is true I declar	ars before filing this case, has entify below. of the pension fund Signature and Declaration ING Bankruptcy fraud is a seriction with a bankruptcy case can. C. §§ 152, 1341, 1519, and 357 examined the information in this and correct.	ious crime. In result in fines	Making a false stats s up to \$500,000 c	ement, concealing imprisonment for impri	EIN: e for contributing Employer Identifit EIN: g property, or obtator up to 20 years, or	to a pension fu	ind? If the pension fund property by fraud
hin 6 ye No Yes. Idd Name	ars before filing this case, has entify below. of the pension fund Signature and Declaration ING Bankruptcy fraud is a seriction with a bankruptcy case can. C. §§ 152, 1341, 1519, and 357 examined the information in this and correct.	ious crime. In result in fines	Making a false stats s up to \$500,000 c	ement, concealing imprisonment for impri	EIN: e for contributing Employer Identifit EIN: g property, or obtator up to 20 years, or	to a pension fu	ind? If the pension fund property by fraud
hin 6 ye No Yes. Idd Name WARN connect 18 U.S I have is true I declar	ars before filing this case, has entify below. of the pension fund Signature and Declaration ING Bankruptcy fraud is a seriction with a bankruptcy case can. C. §§ 152, 1341, 1519, and 357 examined the information in this and correct.	ious crime. In result in fines	Making a false stats s up to \$500,000 c	ement, concealin or imprisonment fo and any attachme	EIN: e for contributing Employer Identifit EIN: g property, or obtator up to 20 years, of the ents and have a real	to a pension furtication number of cation number of catio	ind? If the pension fund property by fraud
hin 6 yes No Yes. Ido Name WARN connect 18 U.S I have is true I decla	ars before filing this case, has entify below. of the pension fund Signature and Declaration ING Bankruptcy fraud is a seriction with a bankruptcy case can. C. §§ 152, 1341, 1519, and 357 examined the information in this and correct.	ious crime. In result in fines	Making a false stats s up to \$500,000 c	ement, concealin or imprisonment fo and any attachme	EIN: e for contributing Employer Identifit EIN: g property, or obtator up to 20 years, of the ents and have a real	to a pension furtication number of cation number of catio	ind? If the pension fund property by fraud
hin 6 ye No Yes. Idd Name I4: WARN connect 18 U.S I have is true I decla Execut	ars before filing this case, has entify below. of the pension fund Signature and Declaration ING Bankruptcy fraud is a seriction with a bankruptcy case can. C. §§ 152, 1341, 1519, and 357 examined the information in this and correct.	ious crime. In result in fines 11. Statement of the foregoing	Making a false stats s up to \$500,000 c	ement, concealin or imprisonment fo and any attachme	EIN: e for contributing Employer Identifit EIN: g property, or obtator up to 20 years, or	to a pension furtication number of cation number of catio	ind? If the pension fund property by fraud